



Candidate's or Committee's Report of Receipts and Expenditures

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Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave., Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.

Name of Candidate or Committee Hand County DemocratsComplete Mailing Address 415 W 1st Ave Miller SD 57362Name of Person Making Report Sheila Coss Daytime Phone Number 853-3512

If you are a candidate, what office are you seeking? _____

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

Type of Report (See pages 4 & 5 of Guideline Book) Year End Financial ReportFor Reporting Period Ending (See pages 4 & 5 of Guideline Book) 10-23-2004*The following verification must be completed before submitting report.*

VERIFICATION OF PERSON MAKING REPORT

I Sheila Coss (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.Date: 10-27-04Sheila Coss, Treasurer
Candidate Signature or
Signature of Committee Treasurer or Chairperson

Revised July 2001

Filed this 22nd day of November 04
Chi Nelson
SECRETARY OF STATE

*\$

Total of All Direct Contributions (Sum of all lines with an *)

Name of Candidate or Committee: Hand County DemocratsFor the reporting period ending: 10-23-04**Schedule B - Fund-Raising Events Proceeds**

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

Type or Name of Event	Net Proceeds
<u>Supper and Auction</u>	<u>678.50</u>
<u>Raffle</u>	<u>450.00</u>
Total:	<u>1128.50</u>

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
Total:		

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income	Amount
Total:	

Name of Candidate or Committee: Hand County Democrats
For the reporting period ending: October 23, 04

Schedule E – Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

[illegible]

Name of Candidate or Committee: _____

For the reporting period ending: _____

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

[illegible]

Name of Candidate or Committee: _____

For the reporting period ending: _____

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1. Amount on hand, if any, at the beginning of the reporting period: \$ 1008.³³~~30~~
2. Receipts

Schedule A - Direct Contributions	\$	<u>300.⁰⁰</u>
Schedule B - Fund-Raising Events	\$	<u>1128.50</u>
Schedule C - In Kind Contributions	\$	_____
Schedule D - Other Income	\$	_____
Total of all Receipts	\$	_____
3. Total Monetary Receipts (A+B+D) \$ 1428.50
4. Candidate's Personal Contribution to Own Campaign \$ _____
5. Monetary Loans to Candidate or Committee During Reporting Period \$ _____
6. Monetary Loans Repaid During Reporting Period \$ _____
7. Expenditures - Schedule E \$ 988.40
8. Unpaid Obligations - Schedule F \$ 0
9. Amount on hand at the close of this reporting period. *
This should equal lines (1+3+4+5) - (6+7) \$ 1448.43

